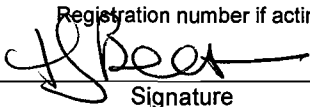


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|                                                                                                                                                                                                                                       |            |                                               |                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------------------------------|------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2006</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)                                                                            |            | Docket Number (Optional)<br>04110/0201116-USO |                  |
| Application Number                                                                                                                                                                                                                    |            | Filed                                         |                  |
| 10/813,558-Conf. #4103                                                                                                                                                                                                                |            | March 29, 2004                                |                  |
| For <b>VACUUM CONTROL SYSTEM</b>                                                                                                                                                                                                      |            |                                               |                  |
| Art Unit                                                                                                                                                                                                                              |            | Examiner                                      |                  |
| 3709                                                                                                                                                                                                                                  |            | B. Popovic                                    |                  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.                                                                                                |            |                                               |                  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):                                                                                                                       |            |                                               |                  |
|                                                                                                                                                                                                                                       | <u>Fee</u> | <u>Small Entity Fee</u>                       |                  |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))                                                                                                                                                                                | \$120      | \$60                                          | \$ _____         |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))                                                                                                                                                                    | \$460      | \$230                                         | \$ <u>230.00</u> |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))                                                                                                                                                                             | \$1050     | \$525                                         | \$ _____         |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))                                                                                                                                                                              | \$1640     | \$820                                         | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))                                                                                                                                                                              | \$2230     | \$1115                                        | \$ _____         |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.                                                                                                                                            |            |                                               |                  |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.                                                                                                                                                                |            |                                               |                  |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                |            |                                               |                  |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.                                                                                                            |            |                                               |                  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u> . I have enclosed a duplicate copy of this sheet. |            |                                               |                  |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>                                               |            |                                               |                  |
| I am the <input type="checkbox"/> applicant/inventor.                                                                                                                                                                                 |            |                                               |                  |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.                                                                                                                                                  |            |                                               |                  |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).                                                                                                                                                                         |            |                                               |                  |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>44,528</u>                                                                                                                                    |            |                                               |                  |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.                                                                                                                                                                         |            |                                               |                  |
| Registration number if acting under 37 CFR 1.34 _____                                                                                                                                                                                 |            |                                               |                  |
| <br>_____<br>Signature                                                                                                                             |            | _____<br>October 30, 2007<br>Date             |                  |
| _____<br>Thomas J. Bean<br>Typed or printed name                                                                                                                                                                                      |            | _____<br>(212) 527-7700<br>Telephone Number   |                  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                 |            |                                               |                  |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.                                                                                                                                                                       |            |                                               |                  |